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A Monthly Journal devoted to those seeking further knowledge on the problem of alcoholism, in the hope that it may prove a unifying bond to all alcoholics everywhere. Individual opinions expressed here are not, necessarily, those of A.A. as a whole.

DR. SAM PARKER OF KINGS COUNTY SUGGESTS "CRITERIA FOR A. A. WORK IN HOSPITALS"

Experience has proved that A.A. is an invaluable aid in the rehabilitation of hospitalized alcoholics. All hospitals should be encouraged to develop wider cooperation with A.A. in planned programs of handling alcoholics. To avoid disappointments and friction, both A.A. and physicians should understand that such a program must be based upon definite objectives in order to achieve some success. The hospital, on the one hand, must not make the error of exploiting A.A. to get rid of its cases indiscriminately, and A.A. members, on the other hand, should not be misguided to assume a missionary responsibility for any kind of alcoholic between four walls. The experience of A.A. has demonstrated that the alcoholic must have something to work with in order to make progress. Medical experience can teach us that there must be certain criteria in the choice of hospital material for successful cooperation with A.A. The occasional difficulties between hospitals and A. A. can be traced to a disregard of these criteria by either the hospital or A. A. members.

Alcoholism is the first symptom of an emotional disorder. Alcoholism is an addiction like many other habits. Alcoholism differs from almost all other addictions, however, in that it eventually causes serious physical complications which, in their final stages, may become irreversible or incurable. In this respect, alcoholism begins as a personality disorder, but may become a serious physical disease. Medical science has not proved universally successful in the handling of the personality basis of alcoholism, and this made the success of A.A. a great contribution; but medical science can be especially effective in the treatment of the physical complications

of alcoholism, where A.A. is impotent. Thus, A.A. should be guided by medical opinion on this point and the hospital should exhaust its resources in the medical care of the alcoholic before considering him as a prospective referral to A.A.

When the physical effects of severe alcoholism have begun to tell on the brain, the hospital, on the one hand, should avoid the referral and A.A., on the other hand, should curb its missionary pride until hospital treatment may have shown that the alcoholic is sufficiently restored to become available as a personality again. The same criteria hold true for other severe physical complications such as cirrhosis and polyneuritis.

Alcoholism also causes severe mental afflictions without advanced physical disturbances. In such instances too, both the hospital and the A.A. should not expect the impossible. Very often alcoholism is merely an incident in the course of common mental diseases (for example, drunkenness as a symptom of severe mental depression). Here, too, psychiatrists will advise treatment of the underlying mental disorder. In cases in which severe and chronic alcoholism has actually destroyed brain cells to the point of mental, intellectual or emotional blunting, neither the hospital nor A.A. should expect the efforts of A.A. to be valuable. In some instances alcoholism causes fits. A.A. should be guided by medical opinion in determining whether the fits in such a case are merely incidental and the personality still workable, or whether the fits are an indication of deterioration.

Many hospitalized alcoholics do not fall into the above classifications (and I have listed only a few as examples), but present only the one symptom of drunkenness. Behind

this symptom lies a protean variety of personalities. Here also both the doctors and A.A. should limit their program to a choice of such cases as offer a possibility of progress, otherwise the failure based on unwise case selection leads to unwarranted disappointments on the part of hospital, patient and A.A. Psychopathic characters or severe personality disturbances should have close psychiatric and social work supervision as well as A.A. referral. In many instances, it will be necessary to take the family situation into consideration in the choice of a case. In general, the hospital should seek first to make a choice among chronic repeaters and, wherever possible, to obtain A.A. assistance in those cases where an honest emotional conflict over the liquor habit and a desire to cooperate on the part of the patient are apparent. Very often A.A. members, in misguided zeal, may bring cases into the hospital with which they have been having difficulties only because of a disregard of efficient criteria. It should be the duty of the hospital to analyze such cases for A.A. members so that the latter may be aware of the pitfalls. It is my experience that the efforts of A.A. in a hospital will be more effective and better appreciated by all concerned if the members visiting the hospital do not approach all patients indiscriminately, nor should the hospital carelessly expect A.A. to assume such responsibilities.

In those hospitals, such as Kings County and Bellevue, which handle a preponderance of acute alcoholism and repeaters, the rapid turnover of patient population would not invite the establishment of A.A. groups. Instead, the function of A.A. would be directed primarily towards the selection of new cases for rehabilitation and the temporary hospitalization of relapsed members. In this connection, let me express a word of caution not to be dismayed by the occasional slips so

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EDITORIAL:

On the 5th Step

Admitted to God, to ourselves, and to another human being the exact nature of our wrongs.

This is a tough step and takes courage to do. It is, however, a step that can be done if you make sufficient effort.

It is not new. The Catholic church uses it in their confessional and the psychiatrist uses it.

Drinking is caused by inner conflicts and the only way to get rid of these conflicts is to bring them out in the open and destroy them. Wrongs cause conflicts, hence the necessity of this step.

Take the first phrase, "Admitted to God." How do you do this? First learn humility so that you can ask help in a humble manner. If you have difficulty in admitting the actuality of a supreme power, work on the premise that there might be one. Once you get your mind in tune with the infinite it is not difficult to realize that you have no secrets from God.

"Admitted to ourselves." This can only be done when we are honest with ourselves. In this program it is folly to try to kid yourself. Be ruthless in your soulsearching and come clean.

Great care should be taken in choosing "another human being." It must be someone you can trust. Your lawyer, your doctor, your priest or minister, another A.A., or a friend; someone who will act as a sounding board and keep your confidence.

Once you take this step you will be astounded at the relief you feel. The burden of despair will be lifted from your back and you will be free.

It is essential for every A.A. to realize the importance of taking this 5th step. By so doing, all enmities, resentments and wrong thinking may be cast out and we can continue to the next step with a clear conscience.

It is advisable to repeat this step from time to time because it is human to err and even A. A. s are human.

Bert T

Second Thoughts...

ON HARVEY...

From the critics I had the impression that Elwood P. Dowd was an alcoholic, and that Harvey, who stands six feet one-and-a-half inches (with his ears down flat) was Dowd's morning-after monster played down to the public as an amiable white rabbit.

Well, let's get this straight: Dowd is no dipso and Harvey is no pink elephant!

Elwood P. is a fine fellow who followed his mother's advice: "In this world you have to

be either very smart or mighty pleasant." For forty years he was very smart; now he's mighty pleasant. He's ever so sorry, too, that he wasted forty years.

To catch up, he spends most of his time in barrooms. Where else can he find the "pleasantest" people? They're wonderful, Dowd and Harvey agree, the finest of the fine. They make no small plans, they have no little worries.

"No one ever brings *small* things to a bar," Dowd says, wistfully.

But Harvey is a problem to Elwood's sister and his niece, with whom he lives. Harvey requires an extra setting at the table; he adds to the traffic problems of the bathroom; Elwood is everlastingly lying up the telephone when he leaves Harvey at home and wanders around to the bar and grill.

To rid the family of the D.T.s (just Dowd Troubles) Elwood is carted off to the sanatorium—Chumley's Rest, no less!

The psychiatrist believes he can cure Elwood. To cure him is to kill Harvey. Well, what do *you* think, or what would *you* do?

"You know what normal people are," warns Harvey's savior (a cab driver), "just bastards!"

So—it's no Mickey for Harvey.

But to get back to business, brother, you remember that Elwood P. Dowd is no drunk. He's just a happy-go-lushy dreamer, and you're still just one drink away from that last "bottom" you hit.

Dave R., Forest Hills, New York

ON THE 3RD STEP...

Now the 3rd step, which reads: "Made a decision to turn our will and our lives over to the care of God as we understand Him," might be summed up as, "Thy will be done."

This is a continuous performance for us alcoholics, if we waul some peace of mind.

It says somewhere in the Bible, *Think not of what ye shall eat, what ye shall drink, or where. withal ye shall be clothed; for God hath knowledge of your need for all these, things, therefore enter ye, first into the, kingdom of God find all shall be added unto you.*

Convinced of this, we try to go about our business wanting nothing for ourselves, but hoping and believing that we may understand in some measure His will for us and have the power to carry that out.

Somehow or other the more we practice this way of thinking the easier life seems to become, and tensions decrease.

With most of us this ability to "let go and let God" does not come automatically but, rather, gradually as a result of turning our thoughts away from ourselves toward others and the various steps in the A.A. program.

Even though we have been in A.A. without a drink for four years we have times when doubts occur and indecision arises in connection with matters concerning ourselves, but thanks to A.A., we can turn to this 3rd step, say, "Thy will be done," proceed to the nearest thing at hand to do, and all is quiet within us again.

Chet F., Stony Creek, Connecticut

The Pleasures of Pre-Publication Reading

For the special delectation of *Grapevine* readers: A chapter, in 2 installments, from the novel *September Remember* by Eliot Taintor, to be published by Prentice Hall on April 16th. The author is an A.A. (Eliot Taintor is his nom de plume) and his book is all about all of us.

Chapter XXI

Boomerang

Kidd Whistler had been optimistic about Joe. All the A.A.s were positive Joe would snap out of it. "Sure, he'd had a slip—so had plenty of other members—but Joe had been in the group too long to go off the deep end—and stay off." Emily was confident too.

"Give him time, Rick, he's had a terrible shock, but Joe's a strong person. Don't worry, darling, or you'll start me worrying about *you*." She had put her arms around Rick's neck and pulled his head down level with her eyes and he had felt her quiet strength going through him. God, how had he ever managed to live without her all these years! How did Joe manage without... and there he was back in the old fretful puzzle of Joe's binge.

Hank maintained that Joe had been heading for trouble for a long time. "Seen it comin'," Hank said, "the way you can feel a storm blowin' up the Sound. It weren't only Sylvia—he was as full of the jitters as a porkypine is of quills afore that." But Hank couldn't explain why, couldn't see how completely Joe's continued drinking knocked the props out from under Rick. Joe had helped him—he had to help Joe now. Not only for Joe's sake but for his own. And he didn't seem to be getting anywhere—except deeper and deeper into a feeling of hopeless uncertainty.

Rick had brought Joe out from Townes Hospital in New York to the "shack," as they called the house on Cognewaugh Road—a sick-looking, self-cursing Joe. But being with Rick and Emily—seeing their evident happiness in each other—had only seemed to make matters worse. Joe, after a few sober, moody, irritable days, had walked out of the house one morning, headed for a wop joint in Mianus famous for good beer in big steins, and had been picked up late that night by Hank Frost. A cop friend of Hank's had called him and Hank had called Rick. "Reckon we better pop Joe into High Pines," Hank had suggested, much to Rick's amaze-

ment. "Seems like that Doc. Joe sets such store by could do somethin' for him now." Rick had agreed, had telephoned and made the arrangements, remembering Wales' tall figure in a blue suit standing on the steps and returning Pell's exaggerated military salute. Wales had caught on fast to Pell's absurd play-acting. Wales was a real guy. Emily had been driving Joe over to High Pines every afternoon, but this way Wales could really keep an eye on Joe.

Still Rick went on worrying and the heat continued. At the Cos Cob station the next afternoon he looked at the tide. It was high. A swim in salt water would be a hell of a lot more refreshing than a dip in his own pool which was now only a few degrees cooler than the air.

Swimming out to the raft with long lazy strokes, he pulled himself up, shook the water out of his eyes and saw a broad brown back against the upright of the diving platform. The back turned and Rick recognized Wales' thick white hair and lean, humorous face. This was luck, especially as the raft was deserted by its usual mob of kids.

"I don't suppose you remember me..." Rick began, squatting on the edge of the raft, his long legs dangling in the cold water.

Wales smiled — it was a wide, generous smile. "Of course I do. You're Light Horse Harry Lee," he laughed, "or you were when I first met you. And what's more important," he added, "you're Joe Kelly's friend."

Rick nodded, his eyes squinting from the red glare of the sun on the water. He jerked his head to face the doctor. "God, I hope you can help Joe—and fast."

Wales studied the emphatic angular features, noted the twitch of Rick's left eyelid. Here was another one headed for trouble if he didn't watch out—all alcoholics seemed to be driven by the same frenzied impatience. "In my business," he said with deliberate slowness, "we learn not to hurry. You can't go fast when you're trying to get at things that have taken a long, long time to grow and a long, long time to be concealed, buried under layers and layers in the unconscious.."

He grinned suddenly and pointed across the harbor at the steeple of a Greenwich church rising serenely against the orange and violet sky. "Hell, this is no time or place for a lecture on psychiatry. Tell you what you do, Rickham, if you're interested. Come on up to New Haven with me tomorrow. I'm giving a speech at the Yale School for Studies on Alcohol. You might learn something," he said in his humorous, lazy voice. "Or if that doesn't tempt you, this might — your Bill Griffith of A.A. is scheduled for the closing talk."

"I'll bet he won't turn up," Rick said. "There's some sort of jinx on Bill Griffith and me. I've been in A.A. nearly a year and I still haven't met the guy, but I'd like to hear you." Rick had made the same complaint to Kidd Whistler at the New York meeting in February. He had been peeved then; now he found it hard to get in a rage, sitting on the float surrounded by orange-green water with this big reposeful man.

The next morning Rick sat in a rattly day coach beside Dr. Sam Wales. It was noisy, dusty and NOT air-conditioned. As mid-summer heat and cinders poured through the open windows, Rick took back all his former diatribes against air-conditioning. Both men folded their coats and put them on the rack over their heads, but even in shirtsleeves they were perspiring constantly, constantly mopping. Rick wanted to question the doctor about Joe but he hesitated, thinking that Wales probably needed time to go over his speech, not knowing how to begin anyhow.

"Go ahead and ask me about Joe Kelly," Wales said suddenly, pulling down his newspaper. "I gather he's pretty much on your mind."

"Well, sure," Rick stammered, "but I don't quite know what I can ask—or rather how much you can tell me."

"But I do." Wales laughed and looked at Rick with his large, humorous blue eyes. "Of course, a psychiatrist, like any doctor—even more than any other doctor—keeps his patients' confidences. But in dealing with an

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PHILADELPHIA STORY ON HOSPITALIZATION

The Philadelphia group considers itself very fortunate. One of the first drunks contacted by Jim B., when he brought A.A. to Philadelphia five years ago, was a relative of one of our most eminent surgeons: Dr. A. Wiese Hammer of the staff of St. Luke's and Children's Hospital. Dr. Hammer spends two to four hours with the group every Sunday advising and counselling, as well as comforting those members who gather at the round table, he is one of our staunchest bulwarks.

It is through Dr. Hammer that we acquired the support and cooperation of Dr. C. Dudley Saul, diagnostician, physician and medical director of St. Luke's and Children's Hospital. Through Dr. Saul's good influences, we were able for many months to hold our open meetings in the hospital. This recognition by medicine that alcoholism is a disease furnished a tremendous impetus to the movement here. It helped immensely in convincing new members that there was hope for them if they sincerely wanted A.A.

Dr. Saul's remarkable genius in putting the medical aspects of alcoholism into plain words so that any layman can easily understand; his sincerity, his ability to explain and answer our problems in a manner that can be accepted by us, have been of inestimable help to the new people trying to make the decision of their lives: AM I AN ALCOHOLIC? Do I want this program?

Dr. William Egbert Robertson, internist of national reputation, is another of our great friends and counsellors. When he can talk to us he really says something. His gentle manner and quiet influence go a long way.

We predict a brilliant future in the treatment of alcoholics for Dr. John L. Green. Here we have a professional man who "knew

all about the treatment of alcoholics" until he attended his first meeting some seven months ago. Although not an alcoholic, "Doc" Green is really one of us. He rarely misses a meeting. In his talk to the group a few weeks ago he told us he might learn something about alcoholism if he could attend the meetings regularly for the next hundred years. But we know he knows plenty now. His efforts at Nazareth Hospital and Frankford are already showing substantial results.

It was Jim B. whose unceasing pounding on the doors of the Philadelphia General Hospital reached the understanding ears of Dr. William F. Turnbull, then superintendent, and Dr. John F. Stauffer, chief psychiatrist. They gave the group permission to send a "committee" to visit those suffering from alcoholism. This group goes over every Saturday and practically holds a meeting right there. We have enrolled about 30 per cent of our membership through these visits to our West Philadelphia "Country Club," as we affectionately call it. We were again fortunate in Dr. Turnbull's successor, who has deep sympathy with our problems and enlists the cooperation of the entire force to help us.

Another untiring aid to the Philadelphia group is Dr. Russell S. Boles, a director of the Research Council on Problems of Alcohol and chairman of the board, Philadelphia General Hospital. Through his kindness many courtesies and much help are given us at the hospital. Although the hospital frowns on repeaters, it has never refused medical treatment to any person sent by the A.A. committee, or by any of our older members. Through Dr. Saul's efforts, the Trustees of St. Luke's and Children's Hospital have set up on "Alcoholic Clinic." This is the first semi-private

institution to accept patients for the treatment of alcoholism for anything like reasonable charges. True, others take us in for arthritis, bronchial troubles, or the belly-ache or *something*, and sock us plenty, but St. Luke's will accept and treat us for alcoholism.

Within our group we have many talents and we want to say a word about them. Dr. McM., Dr. R. and Dr. F. are physician members who can and are doing much work themselves at other hospitals. Dr. G. and Dr. H. are dentists who run across other alcoholics whom they and the group can help. Robert M., psychological consultant, and H.H.H., lay therapist, do great work, and we must not overlook the girls. Gertrude M. (non-alcoholic but the wife of a member) is a R.N., Marion H. (non-alcoholic), a professional social worker. Florence H., voluntary social worker, has been connected with the Jefferson Hospital for seven years, and Catherine P. with the Philadelphia General.

In Philadelphia we ask all members to keep in touch with their clergymen and physicians as a means of learning whether they **have** anyone we can help. When we find someone who needs our help we see to it that that person is called upon at least once a day until discharged, that he or she has cigarettes or a dollar or two with which to get little things of comfort. We seldom have the same person call twice as we want the patient to know that he (or she) is going to have many friends when he leaves. We do the usual follow-up when these patients are returned home. And if they have no home we see to it that they are housed and clothed until they get on their feet.

In other words, we do what all you other alcoholics are doing: we do the best we can.

Winslow T., Philadelphia, Pa.

Dayton has interesting Hospital Record

Our hospital arrangement has worked satisfactorily for several years. The Dayton State Hospital is a state institution for the insane. The local superintendent has been very cooperative and agrees to admit A.A. patients for a ten-day stay at the Hospital without the usual Probate Court proceedings. These persons are admitted not as insane persons, but as potential members of A.A. They are given hydrotherapy but no other treatment unless their condition calls for special attention of some kind. We have a special privilege of visiting any day from 9 A.M. to 9 P.M., and of

course it is the practice of members of the group to see that the patient has plenty of visitors. The patients are given liberty of the grounds, but are obligated not to leave the reservation. The cost is insignificant, and in more than 50 per cent of the cases, it has started the patient on the road to recovery. This plan is not generally adopted at the state institutions, and the question of whether or not any cooperation will be extended to A.A. is a matter entirely within the province of the local superintendent. Here in Dayton we have been particularly fortunate in having a super

intendent who is interested and anxious to cooperate with us. Since facilities of the Dayton Hospital are not available for a patient more than once, we have found that the atmosphere of the Weber Rest Home, in Columbus, is very beneficial for the members who have experienced difficulty after being in the group for some time. Here they can have a five-day rest in A.A. environment.

Ted Weber and the Columbus Group have that burning enthusiasm which is bound to be effective if a patient desires to correct the situation.

William M. M., Dayton, Ohio

Mail Call for All A. A.s in the Armed Forces

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It is becoming increasingly apparent that A.A. is going to be called upon to perform a real job in aiding many veterans of this War during or, more particularly, some time after their re-entry into civilian life. We believe, therefore, that the following piece, written for *The Grapevine* by an A.A. who is himself in the process of undergoing this readjustment, following Army experiences that included participation in the invasion of Normandy, is extremely timely.

Becoming acclimated to a tail-less shirt—assuming you can find any at all—is a small but symbolic problem that every veteran of the military forces encounters in making the transition to civilian ways of life.

The tail-less shirt is not the only reason for feeling shorn. The veteran also feels that a number of other things besides the tail of his shirt are missing. The Army—or the Navy, or whatever his branch of the service—is no longer taking care of him. The privileges and protection that the uniform provides, along with the responsibilities, have come to an end. Your assignment, whatever it may have been, has been finished. There's no longer somebody on hand to tell you, whether you were officer, soldier or sailor, what to do next. You can't even get cigars when you want them. You're just another short-tailed civilian, mister!

The dischargee not only misses the things he found enjoyable while wearing a uniform. Strangely, he also misses some of the things he disliked the most. He may yearn for the very things that used to draw his loudest and longest gripes. If he happens to be a veteran from a combat zone, he may even miss some of the gadgets and conditions that scared him silly while he was in the middle of them. When, for instance, in New York he hears the weekly Saturday noon air raid sirens and, after an involuntary tightening of nerves, he remembers that they're only practice, he may wish momentarily (only momentarily) that they were the real thing. It's not that he ever liked robots or enemy raiders; it's that his nerves are still attuned to the excitement and tension that a combat zone produces in generous quantities as a daily, and nightly fare. War in one phase or another has been reality to him. That has now been removed and what's left seems, at times, unreal and even empty.

Another void becomes apparent in topics of conversation in normal circles. What the veteran has been talking about morning, noon and night for however long he has been in uniform is scarcely suitable now. People just aren't interested in what Sgt. Doakes said to Capt. Whoozit. And you certainly can't blame them for that. Even when they are genuinely interested in hearing something of his experiences, the dischargee discovers that there's a great deal he can't express in a way that is understandable to someone who has not felt what he has. So he tends to avoid the subject—and he certainly does avoid it after one or two encounters with the occasional person who reacts to war anecdotes with a look in his eye that says, "What a line this guy's got!" In such cases, the dischargee learns that what may be commonplace in theaters of war may sound fantastic and unbelievable elsewhere.

All of these factors add up to an emotional disturbance involving lonesomeness, injured vanity, loss of poise and direction, fear of the future and resentments. For many persons, of course, relief at being permitted to return to normal pursuits offsets the other factors. But reconversion from the military to the civilian world calls for considerable readjustments for anyone. For an A.A. member, the readjustment may be especially difficult—and dangerous.

Paradoxically, an A.A. who has had no or little trouble during his enforced separation from the group may be in greater danger during this period of readjustment than the one who has had an up and down fight all the way from enlistment or induction to discharge, if he has gone through military service without any slips or near-slips he has scored a real achievement. The military life imposes severe handicaps on an A.A. It usually prevents him from practicing many of the steps on which he normally depends. It divorces him from

group therapy, 12th step work and inspirational talks. It precipitates him into circumstances that are upsetting and that tend to unbalance anyone's sense of values.

If the A.A. has survived all of that successfully, he's likely to feel pretty strong when he returns to normal life. Certainly he feels that now, once again within his home orbit, among A.A. friends and within reach of all the help he could ask, he is in much less danger, alcoholically, than he was in the service away from home. So he may very easily let down. He may drop his guard. He may become "too tired" to attend any meetings or do any 12th step work. He may slack off in doing some of the little things that help to keep an A.A. growing along A.A. lines.

If he begins to slide off in any of these ways, he's heading for a tailspin and a tight inside loop. Whatever hazardous tendencies he may develop will be aggravated by the emotional disturbances which his military-to-civilian readjustment is bound to create for him even if he remains squarely on the beam. The fact is, he has need to double his guard and keep his defenses on the alert during this period.

Those are facts which this A.A. had to learn the painful way. But, in learning those, he also learned that application of the A.A. way of thinking will ease the transition for the veteran in many ways. Again I have seen how A.A. not only helps to overcome Personal Enemy No. 1, but how infinitely effective it is on many other human problems.

Again, too, I have been reminded forcefully that in A.A. one cannot stand still for long—he either goes backwards or he grows, and he grows only by using a gradually increasing amount of A.A. T. D. Y.

IT'S FREE FOR SERVICEMEN

India, January 27

Dear *Grapevine*: Was pleasantly surprised to receive two issues of *The Grapevine* in the past few days, as I didn't know that our organization had such a swell publication.

I don't know whether one of my friends in the Tucson group has paid for a subscription to *The Grapevine* for me or if these were sample copies, so will appreciate receiving that information from you, and will forward the subscription if such has not been paid.

Hoping that I will continue to keep in contact with all of you through *The Grapevine*, I am, gratefully yours,

John F. M., Sgt. Air Force

Tampa's First Birthday

After a year of the usual "way-ups" and "low-downs," trial and error, failure and success, thirty solid A.A.s were proud hosts at an open meeting of the now firmly established Tampa group. We are all so proud that we think no one else ever had so much before. And yet I guess this group is about the poorest there is. There isn't a moneyed member, but with our limited resources we had a wonderful party. One girl did a lovely thing; she made a corsage and boutonniere for everyone. 125 people wearing flowers is quite a sight.

About 15 came from the Orlando group, the same from Daytona, and a few all the way from Jacksonville. Their support meant much to us. They came, and with gasoline so hard to get, it meant sacrifices. Then we had one of those lucky blessings that seem to befall good A.A.s at the right time. Ed. F. and Connor F. from Philadelphia, and Fred M. from Baltimore, were here to be on the program. Relatives and guests gave awe-struck attention to what can be achieved by the A.A. plan of life, and the Rev. Bramm of St. Andrews Episcopal Church said in his address that what he had seen and heard was truly a miracle.

After the meeting, the super-supper (a decided credit to our five feminine members)

was served in our clubroom. Yes, we have one now, and a telephone too.

Chairman of the meeting was Roy Y., whose pet caution to his little flock is "A.A. must be kept free from personalities." An impossible request to this writer who has watched Roy's tireless effort; seen the unselfish spending of his time, his energy and his money to help this bewildered gathering of lost sheep find its way back into the green pastures of life. He was never too tired; it was never too late; no distance was too far to go. Many times his patience was strained to the breaking point, but the tolerant, loving-kindness of this man never failed. To try and shut out this personality would be like trying to cover up the sun with a 10-cent eye-shade.

Roy, as you other A.A.s may know, was co-founder of the Houston, Texas, group and Dave A. says that his counsel and encouragement is partially responsible for the splendid growth in Orlando. Roy now is turning his eyes across Tampa Bay, where he plans to help Fred M. organize a group in St. Petersburg, and he has also laid the groundwork for a group in Bay Pines Veterans Hospital.

So now Tampa wants its place on the A.A. map. We are proud, we are happy, and we are truly and humbly grateful to God. *Mary S.*

Ways of Coming Into A.A..

My psychiatrist maneuvered me into A.A. He wrote to the clubhouse, got the secretary's name, told her about me and vice versa. But that was after we had made a bargain, following many months of psychiatric treatments. Not in a sanatorium, but in real life. Reality? I didn't know the meaning of that, and am only beginning to learn now, after twenty months in A.A. You can still be holding down a job, as I was doing, and have little conception of the real world about you. The psychiatrist repeatedly told me there was no cure for alcoholism. Every few months he would gently suggest A.A. While continuing to drink, I insisted there must be a cure—and rejected A.A. Finally he got me there.

Pulling my feet up that, long corridor leading to the main room of the clubhouse, I was going, so I thought, to my doom. I wasn't doing this of my own volition, or so my conscious mind was saying. My bargain with the psychiatrist was that I would give A.A. a two-week trial (his suggestion); then I could re-

turn to him and (my suggestion) he'd give me work to do to pay for future treatments.

Reaching the main room that first evening, I halted abruptly before going upstairs to the secretary. It was before the meeting hour. Men and women were standing in groups talking. I looked at them. What followed is one of those sensations that transcends accurate description. It came with such suddenness and enveloping completeness—that feeling which said: I have come home at last. The words repeated themselves over and over in my mind: I have come home at last. I turned and walked up the stairs with the feeling of unself-consciousness akin to that of a child—something I had never before experienced in adult life. A few days later I began to understand what my good and wise psychiatrist had known for some time: my need thenceforth lay along spiritual lines, part of which consisted in helping others—something startlingly new to me. A.A., where I feel so beautifully at home, is filling that need. *Maeve. S.*

AFTER 2 YEARS IN A. A.

Two years in A.A. finds me increasingly happy and, I hope, a more useful citizen. It seems now that results come almost in direct ratio to my application of what A.A. offers for the taking. After more than thirty years of egotistical, selfish, and too often asocial behavior, I have slowly and laboriously acquired, through A.A. text and precept, a usable quota of humility.

This has proved to be the key to undeserved cooperation from many of my fellowmen and, of even more importance to me, to a reawakened faith in God. The spiritual and emotional lift received from the members who welcomed me at my first meeting in Forest Hills has increased steadily. Along with this have come, new friends and a better understanding of how to use their experience.

The 24-hour plan made sense to me and proved to be the crutch I needed. That I have had no serious urge to drink since grasping its significance, seems to many, myself included, a minor miracle. Losing several good jobs, going to jail, being estranged from family and friends; finding myself flat broke and homeless, after seeking medical and psychiatric help; making blind, desperate (but proud) appeals to the church—none of these had helped me to even face, let alone solve, my problem. Many helping hands were offered but I could not take them.

The answer was found in A.A.'s way of living: first by acknowledging my inability to work out my own problems, then humbly seeking the help of God to learn His will; avoiding resentments and intolerance; trying each day to grow in understanding and work; staying away from drink and, to me equally important, staying away from the kind of thinking that precedes drinking; being willing to share my imperfect understanding with someone it might help; and gradually through those efforts acquiring the serene knowledge that good comes when selfishness, arrogance, and intolerance are cleared away.

Problems are not automatically eliminated; rather I find it pleasant to work them out, confident that right (not necessarily my own brand) will follow. A.A. has taught me how to live with myself without seeking relief from the mess by drinking. How did it happen? I was licked, scared, hopeless. All my defenses had been breached. A.A. made sense. Being an extremist, I look it in large doses: many meetings, all the luncheons I could make, hours of discussion with patient, sympathetic A.A.s. God bless them all. *Mel A. C.*

A. A. 's COUNTRY-WIDE NEWS CIRCUIT

There've been lots of radio broadcasts in all parts of the country publicizing A.A., educationally speaking. But February 6th of this year was, for Manhattan A.A.s at least, an outstanding date in radio history. On that day Station WMCA, the first of the city's networks to mention A.A. in one of its regular entertainment features, discussed the alcoholic problem and A.A. *openly*, in one of the "soap-operas." The drunken heroine of the story, sorely in need of help to patch up her emotionally ragged home, was informed of A.A. by her doctor and advised to try it. She did; she got sober—and of course she lived happily ever after.

Here's another date to remember: St. Patrick's day, March 17. Rudy P., French horn player of the New York Philharmonic, together with some of his generous-spirited symphonic friends, will give on St. Patrick's day at the A.A. Cosmopolitan clubhouse, 405 W. 41st St., New York City, a program of chamber music, to begin at 8:45 P.M. Beethoven's septette and some woodwind quintettes will be played.

The Middle West has two new, thriving groups—with a Before and After sound—one in Painsville, Ohio, and the other in Blissfield, Michigan. . . . Among Los Angeles' more than 20 groups is one that probably rates as the most exclusive of any in the U. S. A. Only the alumni of Skidrow and jail are eligible. . . . The smallest group in the country is in Casanovia, New York, a suburb of Syracuse, with only two members. Some time ago a drunk airplanned to New York for a visit with Bill; he then returned home and soon sobered up another drunk; then he had a slip himself and was in turn sobered up by his neophyte. Now they're both dry and intent on recruiting more members in the Syracuse area. Their address: Box E, Casanovia, New York. . . . A.A.s of the lush, bayou country of Baton Rouge, Louisiana, wisely stress the lack of "moral lecturing" in their publicity.

... A columnist of the Atlanta, Georgia, *Journal* says that once in a great while a newspapermen happens upon a group of sincere people, and that once makes up for all the "uplift" organizations which have plagued his journalistic life. "Such a

group is Alcoholics Anonymous, who the other night appeared before 103 chronic alcoholics at the Atlanta City Jail to explain the A.A. program—to give them hope for the day of their release". . . . Tulsa, Oklahoma, will soon welcome a new member—an inmate of McAlester Prison, who has been corresponding with Tulsa A.A.s.

This country at large seems to be delightfully astonished by the St. Louis dinner given Marty Mann, executive director of the National Committee for Education on Alcoholism, and A.A.'s First Lady, judging by the reprints in countless newspapers, which unanimously refer to the evening as "the strangest ever." The hosts were the combined A.A. groups of Greater St. Louis, the guests prominent St. Louisans. While the guests—all except Marty—drank Scotch, bourbon, and gin, the hosts slaked their thirsts with soft drinks and gayly watched the guests being transformed into many stages of hilarity. . . . Latest highlight of the Montpelier, Vermont, group was the 150-mile plane and bus trip through a blizzard, taken by several members to meet Marty and hear her talk in Montreal.

Walter Winchell lately devoted his entire Broadway column to current folklore about Manhattan's bars, of which he contends there are more than street corners. *The Lost Weekend*, which, according to Winchell, has best-sold a nation into cautionary drinking, caused "a lot more pity than the real sight usually does." The smash-hit *Harvey* makes "drinking a good deal funnier than it always is." And "Alcoholics Anonymous, who've been shouting so loud they are fast becoming as familiar as a hangover, have been there before". . . . Apropos of hangovers, here's one to pass on to your non-A.A.-needing pals. A marvellously simple cure for a hangover is reported by people doing much transatlantic hopping these days. The victim of an all-night party has only to board a long-distance plane and put on an oxygen mask. Four hours later, arriving in, say, Newfoundland, he feels fine.

"The Water Wagon Gets New Stall" is one of the titles of a series of six wonderfully instructive, sometimes uproariously funny stories, with accompanying cartoons, by Elgar Brown of Chicago's *Herald-American*. Be-

ginning with the fictitiously-named J. Buffington Nutmeg as a lush-about-town, then putting him through his paces as a drunk desperately wanting to stop drinking, Mr. Brown shows Nutmeg being introduced to A.A. But Nutmeg has tried to "swear off" so many times and has sought help from so many sources that he is plagued by recurrent doubts. We see him reading the book, going to meetings, doing 12th step work. In the last of the series Nutmeg is entering his ninth month of sobriety, whereas never previously in the past decade of his fruity career had the old boy laid off the liquor for one consecutive week. He went on the wagon once in 1931 and it was the dreariest day of his life. Clinging to the 24-hour system of operating, Nutmeg today ventures no predictions as to the dry spell's duration. He hopes it's permanent, but all he knows, for sure, is that he is sober this day.

The A.A. seamen's group is doing a fine job with their weekly meeting at the New York Seamen's Institute (the dog house), 25 South St., and new members are constantly coming to their clubhouse at 334½ W. 24th St., Manhattan. . . . The Kansas City, Kansas, group has bought and moved into a 12-room clubhouse. . . . The Hollywood A.A.s have just leased new headquarters at 2560 North Beechwood Drive, complete with large hall, club rooms, and kitchen.

Ever hear of W.A.N.A.? They are patients released from hospitals in the New York area, who have banded together in an effort to realize the strength and hope for mental patients implied in the name of their society, "We Are Not Alone." Their accent is on the psychological welfare of discharged mental patients, supplementing clinical after-care with the personal help and understanding of those who have faced the same problems and made satisfactory adjustments, and providing ex-patients with an opportunity to take an active part in creating better care for the mentally ill.

Dr. G. H. Gehrman, medical director of the DuPont Company, a guest speaker of the Wilmington, Delaware, group, frankly admitted that A.A. "has a lot to teach the medical profession," as well as industry.

CRITERIA FOR A.A. WORK THE PLEASURES OF READING

(Continued from Page, 1)

common in the early stages of A.A. rehabilitation. To the experienced psychiatrist, such ups and downs are characteristic of all neurotic processes. Physicians will not be discouraged by this class of repeaters and many of the most successful members of A.A. have been through this phase.

In the chronic hospitals such as state institutions, A.A. can effectively project groups which serve to act as a therapeutic cell within the hospital framework. The candidates for such a project are the more chronic alcoholics and psychopathic repeaters who have to be nursed in a preliminary fashion for a somewhat greater length of time than acute types of alcoholics. Many such groups have already been formed, and the institutions have been grateful for their success.

A.A. has achieved a validity and respect because the members have furnished a valuable contribution to the fight on a severe problem of society. We must remember however that alcoholism is only a symptom and, although the problem is a social one and the method universal, it must deal with the individual himself or herself. We cannot expect good intentions and missionary zeal alone to solve the problem or effect a cure. The instrument of A.A. works wonders only when it can be adjusted to the individual who can be saved in this way. Physicians should be happy to exploit this opportunity, and they can help A.A. by concentrating its fire.

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alcoholic who is a member of A. A. there are some things I like to talk over with other members. You belong to a remarkable organization, Rickham."

Two large colored women in the seat ahead got up and waddled to the door as the train pulled into Bridgeport. Kick reached over and pushed the seat back, getting his long legs out of the aisle and stretching them out on the dusty plush. "What puzzles me about Joe is... well, he isn't half as up-one-minute and down-the-next as I am. What Hank Frost calls the perigee tides of an alky."

"That's good," Wales said. "Damn good way to express it. Tell you how one of my colleagues put it. Look..." He took his big saddle leather shoes off the seat and ran his hand along the horizontal edge. "We'll call this line the normal tension level of a normal person. Your so-called normal guy may go a few inches up when he's high," Wales' strong brown hand rose slightly above the plush seat, "or a few inches down when he's low, but an alcoholic goes way up—several feet—and way down to the floor. Erratic curve, see?"

"Like my fever chart when I had malaria," Rick nodded.

"Same idea," Wales agreed. "You're sick people. Only you're apt to forget that fact when you stop drinking. The pattern is still there, see? The big swing from high to low," Wales gestured again, "is always in the alcoholic—or neurotic—personality. And alcoholics are neurotics. Liquor exaggerates the swing. Some people drink when they are on the up-curve—to celebrate, others when they are hitting bottom—to drown their sorrows. That's fairly obvious, but the thing that a lot of you guys who quit drinking may not understand is that even after you've cut out alcohol you haven't changed your emotional pattern."

"That's right." Rick nodded again. "I'm not quite as bad as I was when I was boozing but I still get unaccountable elations and damnable depressions — sometimes over nothing. And I've been 'dry' nearly a year."

Wales was fanning himself with the folded newspaper. The motion was leisurely, soporific. "You'll probably have to guard against those moods for more than a year. Maybe the rest of your life. But knowing about them usually helps and there are ways to cope with them when you feel them coming on—call up an A.A. friend, go to a ball game, read a mystery, go for a swim the way you did

yesterday and sort of keep that normal level of tension in mind." He drew his finger along the edge of the dusty red plush neat again.

Rick look out a pack of cigarettes, offered one to Wales, he felt more relaxed, more at peace with himself and the world, than he had since he had turned the knob of the radio over a week ago to the horror of Sylvia's suicide. Joe was in good hands.

"Another thing my colleague says—as a matter of fact he hasn't said it publicly yet, but it is to appear in an article in the December issue of the *Quarterly Journal of Studies on Alcohol*—he calls alcoholism 'a disease of growing ego-centricity'. How does that strike you?" Wales' humorous blue eyes studied Rick.

"Hits me below the belt," Rick laughed. "That's the kind of a guy I am—or maybe was—but it's not so true of Joe. At least I don't think it is."

Wales didn't answer directly. He went off at what seemed to Rick a sudden tangent. "Ever meet any of Joe's family?"

"You mean Monica and Jimmy?" Rick asked. "No. I was in Central America when that happened."

"I was thinking of his mother and father and an older sister he seemed to be pretty fond of."

"You mean it goes back that far?"

"H-m-m." Wales didn't pursue it. "I was talking to Miss Willard when she drove Kelly over one day. She had a theory that Joe is over-romantic about women. Feels he's let them down. Could be. Fits in with his childhood picture. Very perceptive person, Miss Willard. Good thing if Joe fell for her."

"Not on your life!" Rick shouted and then laughed at his explosion.

Wales threw back his white head and laughed too. "Congratulations, Rickham. And I mean it. I've only met three women who have her quality—one of them is Mrs. Wales, thank God, and the other is Lois Griffith."

The platform of the New Haven station was unrolling under their window. They grabbed their coats off the rack, found a taxi and drove through the overgrown town to the red brick buildings of the Yale Divinity School.

The hall was well filled with social workers, ministers and temperance lecturers who constituted the bulk of the enrollment. Rick recognized several A. A. members from various chapters and joined them as Dr. Wales made his way to the platform.

(To be continued next month)